



2633
[1EW]

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/724,179	
	Filing Date	November 28, 2000	
	First Named Inventor	Wenhua Lin	
	Group Art Unit	2633	
	Examiner Name	Curs, Nathan M.	
Total Number of Pages in This Submission		Attorney Docket Number	LIGHT1320

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div><input checked="" type="checkbox"/> Postcard</div>	Remarks	

Customer Number or Bar Code Label	<div>(Insert Customer No. or Attach bar code label here)</div>
-----------------------------------	--

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-2326. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dated: 2/15/06

By: [Signature]
Attorneys for Applicant(s)

Phone: (760) 731-3091
Fax: (760) 728-1541

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date: <u>2/15/06</u>			
Typed or printed name	TRAVIS DODD		
Signature	<u>[Signature]</u>	Date	<u>2/15/06</u>



Docket No. LIGHT1320

Signature

1